PTO/SB/17 (10-03)

Approved for use through 7/31/2006. OMB 0651-003:  U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE of the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number										
		Complete if Known								
FEE TRANSMITTAL		A = = !!		Missanh		09/940,54		<del></del>		
						August 29, 2001				
for FY 2004			3				Joun Ho Lee			
Effective 10/01/2003, Patent fees are subject to annual revision.		First Named Inventor				S. H. Rao				
· · · · · · · · · · · · · · · · · · ·		Examiner Name								
Applicant claims small entity status. See 37 CFR 1.27		Art Unit				2814				
TOTAL AMOUNT OF PAYMENT (\$) 1720.00			Attorney Docket No. 8733.497.00-US							
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)								
X Check Credit Money Other None	3. /	3. ADDITIONAL FEES								
Card Corder C										
Deposit Account:	Larg	e Entity	Small	Entity				•,		
Deposit So-0911	Fee	Fee	Fee	Fee	-	Fee Desc	rintion			
Number	Code	(\$)	Code	(\$)		ree Desc	ліраон	Fee Paid		
Deposit Account McKenna Long & Aldridge LLP	1051	130	2051	65	Surcharge	<ul> <li>late filing fe</li> </ul>	e or oath			
Name The Director is authorized to: (check all that apply)	1052	50	2052	25	Surcharge sheet.	<ul> <li>late provision</li> </ul>	onal filing fee or cover	-		
	4052	420	4053	120		<b>.</b>	_	<b></b>		
Charge fee(s) indicated below X Credit any overpayments	1053		1053	130		h specificatio				
X Charge any additional fee(s) or any underpayment of fee(s)	1812	2,520	1812		•		parte reexamination			
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	920*	Examiner a	s publication of ection	of SIR prior to			
to the above-identified deposit account.	1805	1,840*	,840* 1805 1,840* Requesting Examiner a			publication o	of SIR after			
FEE CALCULATION	1251	110	2251	55		or reply within	n first month			
1. BASIC FILING FEE	1252	420	2252	210	Extension f	or reply within	n second month	i		
Large Entity Small Entity	1253	950	2253	475	Extension for	or reply within	n third month	950.00		
Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension f	or reply within	n fourth month	<b>.</b>		
1001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	Extension f	or reply within	n fifth month			
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of A	ppeal				
1003 530 2003 265 Plant filing fee	1402		2402	165	•	ef in support o	f an appeal			
1004 770 2004 385 Reissue filing fee	1403		2403	145	•	r oral hearing				
1005 160 2005 80 Provisional filing fee	1451 1452	•	1451 2452	1,510 55		nstitute a pub revive – unav	lic use proceeding	<u> </u>		
SUBTOTAL (1) (\$) 0.00	1453		2453	665		revive - uninte				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501		2501	665		fee (or reissu				
Extra Fee from	1502	480	2502	240	Design issu	·	•			
Total Claims	1503	640	2503	320	Plant issue	fee		<del> </del>		
Independent -3** = x	1460	130	1460	130	Petitions to	the Commiss	sioner			
Claims ————————————————————————————————————	1807	50	1807	50	Processing	fee under 37	CFR 1.17(q)			
Large Entity Small Entity	1806	180	1806	180	Submission	of Information	on Disclosure Stmt			
Fee Fee Fee Fee Fee Description	8021	40	8021	40			ssignment per			
Code (\$) Code (\$) Fee Description  1202 18 2202 9 Claims in excess of 20						mes number o mission after	of properties) final rejection			
1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	385	(37 CFR 1.	129(a))	•			
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385		dditional inver 37CFR 1.129		,		
1204 86 2204 43 ** Reissue independent claims	1801	770	2801	385	-		xamination (RCE)	770.00		
over original patent 1205 18 2205 9 ** Reissue claims in excess of 20	1802	AUZ MIII I IAUZ MIII '				or expedited examination				
and over original patent					e (specify)					
SUBTOTAL (2) (\$) 0.00	*Red	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 1720								
**or number previously paid, if greater; For Reissues, see above										
SUBMITTED BY (Complete (if applicable))							(if applicable))			
Name (Print/Type) Valerie P. Hayes		tration No ey/Agent)		,005		Telephone	(202) 496-7564			
	Springerit)				Date	September 3, 2	 			
Signature Valleur T. Haux							Deptember 3, 2	<del></del>		